

# MULTIPLE DEPENDENT LAIM FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1				
3		1				
4		1				
5						
6						
7						
8						
9						
10	1					
11		1				
12						
13						
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18						
19						
20						
21						
22						
23						
24	1					
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37	1					
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50	1					
TOTAL IND.	4					
TOTAL DEP.						
TOTAL CLAIMS						

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51		1				
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		1				
59		1				
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	4					
TOTAL DEP.						
TOTAL CLAIMS						